

CLAIMS ONLY						Application Number 09786290	Filing Date					
						Applicant(s)						
M.18.04						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	I						51					
2			I				52					
3			I				53					
4			I				54					
5			I				55					
6			I				56					
7			I				57					
8			I				58					
9	I	I	I				59					
10			I				60					
11			I				61					
12							62					
13			I				63					
14							64					
15	I		I				65					
16							66					
17							67					
18							68					
19							69					
20							70					
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36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09 / 780 290	FILING DATE
						APPLICANT(S)	
						CLAIMS	
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
IND.	DER.	IND.	DER.	IND.	DER.	IND.	DER.
1						51	
2						52	
3						53	
4						54	
5						55	
6						56	
7						57	
8						58	
9						59	
10						60	
11						61	
12						62	
13						63	
14						64	
15						65	
16						66	
17						67	
18						68	
19						69	
20						70	
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22						72	
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24						74	
25						75	
26						76	
27						77	
28						78	
29						79	
30						80	
31						81	
32						82	
33						83	
34						84	
35						85	
36						86	
37						87	
38						88	
39						89	
40						90	
41						91	
42						92	
43						93	
44						94	
45						95	
46						96	
47						97	
48						98	
49						99	
50						100	
TOTAL IND.	2	↓	2	↓			
TOTAL DER.	9	↔	10	↔			
TOTAL CLAIMS	11		12				

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

Barbara Campbell
National Stage Processing
(703) 305-3031